

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000056114

Entity Name: AKARLAR SIGNING LOAN SOLUTION LLC

Current Principal Place of Business:

1152 NW 2ND STREET
MIAMI, FL 33128

Current Mailing Address:

P.O. BOX 12985
MIAMI, FL 33101

FEI Number: 47-3580660

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LACAYO, KARLA N
1152 NW 2ND STREET
MIAMI, FL 33128 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGR
Name LACAYO, KARLA N
Address 1152 NW 2ND STREET
City-State-Zip: MIAMI FL 33128

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KARLA N LACAYO

MGR

04/04/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date